	PATEN`	ORD	10	16.	2012	5					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALI TYPE	LENTIT	Y	отн	ER THAN
1	OTAL CLAIM				4		E F	Ξ <i>Ε</i> .	RATE		
F	OR	иимве	NUMBER FILED		NUMBER EXTRA		FEE 35!	5.00	BASIC F		
T	OTAL CHARG	r	minus 20=			X\$ 9	_ _	0	1/2.2	·- 	
IV.	DEPENDENT		minus 3 =			X40:			·		
М	ULTIPLE DEPE	ENDENT CLAIM	PRESENT	RESENT			-	-	OI	A 700=	
•	f the difference	e in column 1 i	s less than	zero enler	"0" in	column 2	+135		01	R +270=	
If the difference in column 1 is less than zero, enter "0" in column 2							TOTA	٠ ـــ ــ	0	R TOTAL	L
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) SMALL ENTITY											R THAN ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO	EST BER OUSLY	PRESENT EXTRA	RATE	ADI	OI-	RATE	ADDI- TIONAL FEE
MON	Total	. 20	Minus	. 2	0	=	X\$ 9=		OF	X\$18=	1
AME	Independent	. 2	Minus	ى	ţ	=	X40=	-	OF	You	1
	FIRST PRES	ENTATION OF N	NULTIPLE DI	PENDENT	CLAIM		+135=				1
		*					TOTA		OR	TOTAL	
		(Column 1)		(Calum	- O	(Caluma 0)	ADDIT. FE		OR	ADDIT. FEI	
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUMB PREVIOU PAID F	ST ER JSLY	PRESENT EXTRA	RATE	ADD TION. FEE	AL	RATE	ADDI- TIONAL FEE
ENO	Total	26	Minus	1.20		=	X\$ 9=		OR	X\$18=	
AM	Independent FIRST PRESE	NTATION OF M	Minus	PENDENT (CI AIM	-	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR	+270=	,
		/ ₁₋ 1 - 0					ADDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)	100-00	' (Column		(Column 3)					
		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA	RÂTE	ADDI TIONA FEE		RATE	ADDI- TIONAL FEE
	Total .	•	Minus	••		=	X\$ 9=		ОЯ	X\$18=	
	Independent	•	Minus			2	X40=	1	7	X80=	
1	FIRST PRESE	 	 	-OR							
If the entry in column 1 is ress than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
Ti	ne "Highest Numl	nder Previously Paid	iid For" IN THI 3 For" (Total or	S SPACE is le Independent)	iss than is the h	3, enter "3." lighest number fo					

Application or Docket Number